

FAX COVER SHEET

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FROM: JINAN GLASGOW
TO: USPTO Fax # 703.305.7718 Group 1744
DATE: 12/26/2001
RE: Office Action Response for
TOTAL PAGES (including cover): 20

 Note : credit card form
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PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 510)

Complete If Known

Application Number	09/723,733
Filing Date	11/28/2000
First Named Inventor	Horton
Examiner Name	K. Thornton
Group Art Unit	1744
Attorney Docket No.	1300-009

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
 Deposit Account Number
 Deposit Account Name
 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:
 Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	<input type="text"/>
108 320	206 160	Design filing fee	<input type="text"/>
107 480	207 245	Plant filing fee	<input type="text"/>
108 710	208 355	Reissue filing fee	<input type="text"/>
114 150	214 76	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20** =	<input type="text"/> X <input type="text"/> = <input type="text"/>	<input type="text"/>
			-3** =	<input type="text"/> X <input type="text"/> = <input type="text"/>	<input type="text"/>

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

*or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
106 130	205 85	Surcharge - late filing fee or oath	<input type="text"/>
127 60	227 26	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139 130	139 130	Non-English specification	<input type="text"/>
147 2,620	147 2,620	For filing a request for ex parte reexamination	<input type="text"/>
112 820*	112 820*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115 110	215 55	Extension for reply within first month	<input type="text"/>
116 390	218 196	Extension for reply within second month	<input type="text"/>
117 880	217 446	Extension for reply within third month	455
118 1,380	218 886	Extension for reply within fourth month	<input type="text"/>
128 1,890	228 946	Extension for reply within fifth month	<input type="text"/>
119 310	218 155	Notice of Appeal	<input type="text"/>
120 310	220 166	Filing a brief in support of an appeal	<input type="text"/>
121 270	221 135	Request for oral hearing	<input type="text"/>
138 1,510	138 1,510	Petition to institute a public use proceeding	<input type="text"/>
140 110	240 88	Petition to revive - Unintentional	<input type="text"/>
141 1,240	241 620	Petition to revive - Unintentional	<input type="text"/>
142 1,240	242 620	Utility issue fee (or reissue)	<input type="text"/>
143 440	243 220	Design issue fee	<input type="text"/>
144 800	244 300	Plant issue fee	<input type="text"/>
122 130	122 130	Petitions to the Commissioner	<input type="text"/>
123 50	123 50	Processing fee under 37 CFR 1.17(q)	<input type="text"/>
126 180	126 180	Submission of Information Disclosure Stmt	<input type="text"/>
661 40	681 40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146 710	248 355	Filing a submission after final rejection (37 CFR § 1.128(b))	<input type="text"/>
149 710	248 365	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
179 710	279 365	Request for Continued Examination (RCE)	<input type="text"/>
168 800	189 800	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify)		555 terminal disclaimer fee	<input type="text"/>

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 510)

SUBMITTED BY		Complete If Applicable	
Name (Print/Type)	ViNan Glasgow	Registration No. (Attorney/Agent)	42,585 Telephone 919.664.8222
Signature		Date	12/26/2001

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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission **20**

Application Number	09/723,733
Filing Date	11/28/2000
First Named Inventor	Horton
Group Art Unit	1744
Examiner Name	K. Thornton
Attorney Docket Number	1300-009

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input checked="" type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

Terminal disclaimer included in Office Action response

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

JiNan Glasgow

Signature

Date

12/26/2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: **12/26/2001**

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JiNan Glasgow

SUBMITTED VIA FAX 703.305.7718

Signature

Date 12/26/2001

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JULIAN GLASGOW

Typed or printed name of person signing Certificate

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Office Action Response
for application # 09/723,733
attorney docket # 1300-009

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